Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on	Alexandra	
your government-issued picture identification (for	First name	First name
example, your driver's	Candela	
license or passport).	Middle name	Middle name
Bring your picture	Whittle	
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years		
Include your married or maiden names.		
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2409	
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Whittle Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number

3/11/20 3:52PM Debtor 1 Alexandra Candela Whittle Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		112 Avalon Road Summerville, SC 29483	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Dorchester	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
5.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

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Part 2: Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? □ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

Alexandra Candela Whittle

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Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Debtor 1

Alexandra Candela Whittle

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Debtor 1 Alexandra Candela Whittle

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Alexandra Candel	a Whittle		Case number	(if known)		
Part	6: Answer These Quest	ions for Repo	orting Purposes				
16.	What kind of debts do you have?		re your debts primarily consur dividual primarily for a personal,		ed in 11 U.S.C. § 101(8) as "incurred by an		
			No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17.				
				at are not consumer debts or business	debts		
17.	Are you filing under Chapter 7?	□ No. I a	am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and			u estimate that after any exempt proper e to distribute to unsecured creditors?	ty is excluded and administrative expenses		
	administrative expenses are paid that funds will		No				
	be available for		Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		□ 1,000-5,000	2 5,001-50,000		
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	5 0,001-100,000		
		100-199		□ 10,001-25,000	☐ More than100,000		
		200-999					
19.	How much do you estimate your assets to	□ \$0 - \$50,		□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion		
	be worth?	□ \$50,001 · ■ \$100,001		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
		□ \$500,001		□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$50,	000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,001		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
	to be:	_	- \$500,000	\$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		\$500,001	- \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have exam	ined this petition, and I declare u	under penalty of perjury that the informa	ation provided is true and correct.		
		If I have cho United State	sen to file under Chapter 7, I am s Code. I understand the relief a	n aware that I may proceed, if eligible, u available under each chapter, and I choo	nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.		
				y or agree to pay someone who is not a ce required by 11 U.S.C. § 342(b).	an attorney to help me fill out this		
		I request rel	ef in accordance with the chapte	er of title 11, United States Code, specif	ied in this petition.		
				ealing property, or obtaining money or p 50,000, or imprisonment for up to 20 year	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			dra Candela Whittle Candela Whittle Debtor 1	Signature of Debtor 2	2		
		Executed or		Executed on			
			MM / DD / YYYY	MM /	DD / YYYY		

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Debtor 1 Alexandra Candela Whittle

Bar number & State

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ingrid H. Rudolph	Date	March 11, 2020				
Signature of Attorney for Debtor		MM / DD / YYYY				
Ingrid H. Rudolph						
Printed name						
Ingrid H. Rudolph, P.C.						
Firm name						
1483 Tobias Gadson Blvd., Suite 205A						
Charleston, SC 29407						
Number, Street, City, State & ZIP Code						
Contact phone 8438144215	Email address	irlaw88@yahoo.com				
100739 SC						

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	Document Fage 8 of 57			G/ 1 1/20 0:021 III
Fill	in this information to identify your case:			
Deb	otor 1 Alexandra Candela Whittle			
D-1	First Name Middle Name Last Name			
	otor 2 puse if, filing) First Name Middle Name Last Name			
Unit	ted States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA			
	se number	ſ		k if this is an ided filing
Of	ficial Form 106Sum			
	mmary of Your Assets and Liabilities and Certain Statistical Information	on		12/15
Be a	as complete and accurate as possible. If two married people are filing together, both are equally responsi	ble for		
	rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing an r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	nende	d schedu	ıles after you file
Par				
ıaı	Guillianze Four Assets			
			Your a	issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)			•
١.	1a. Copy line 55, Total real estate, from Schedule A/B		\$	402,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	50,599.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	452,599.00
Par	t 2: Summarize Your Liabilities			
			Your I	iabilities
				nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	D	\$	400,116.89
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)			
Э.	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	91,717.11
	Your total liabil	lities	\$	491,834.00
	, our total mass		<u> </u>	431,034.00
Par	t 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I)			
4.	Copy your combined monthly income from line 12 of Schedule I		\$	0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	1,552.82
Par	t 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court wi	ith you	r other so	hedules.
	■ Yes			
7.	What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primaril household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ly for a	personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules	ck this i	box and s	submit this form to

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Debtor 1 Alexandra Candela Whittle

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____133.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	i otai ciaim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Name Name Name OGA/B B: Pro Iy list and descended and access is needed, atta	DISTRICT of DISTRI	e Name OF SOUTH an asset only e. If two marr neet to this for	Last Name	are equally responsible for	supplying correct
Name Name Py Court for the py Court fo	Middle Middle DISTRICT DPERTY Cribe items. List a surate as possible ach a separate sh	on Name OF SOUTH an asset only e. If two marriaget to this for	cast Name CAROLINA once. If an asset fits in more than ited people are filing together, both rm. On the top of any additional page	are equally responsible for	amended filing 12/15 t in the category where your supplying correct
Name Name Py Court for the py Court fo	Middle Middle DISTRICT DPERTY Cribe items. List a surate as possible ach a separate sh	on Name OF SOUTH an asset only e. If two marriaget to this for	cast Name CAROLINA once. If an asset fits in more than ited people are filing together, both rm. On the top of any additional page	are equally responsible for	amended filing 12/15 t in the category where your supplying correct
O6A/B B: Proplete and according to the ended, attractions of the ended according to the end acc	perty cribe items. List a curate as possible ach a separate sh	or south an asset only e. If two marr neet to this fo	once. If an asset fits in more than ited people are filing together, both rm. On the top of any additional page	are equally responsible for	amended filing 12/15 t in the category where your supplying correct
O6A/B B: Proplete and according to the ended, attractions of the ended according to the end acc	perty cribe items. List a curate as possible ach a separate sh	or south an asset only e. If two marr neet to this fo	once. If an asset fits in more than ited people are filing together, both rm. On the top of any additional page	are equally responsible for	amended filing 12/15 t in the category where your supplying correct
06A/B /B: Pro ly list and descriplete and accis needed, atta	perty cribe items. List a curate as possible ach a separate sh	an asset only e. If two marr neet to this fo	once. If an asset fits in more than ied people are filing together, both rm. On the top of any additional pa	are equally responsible for	amended filing 12/15 t in the category where your supplying correct
/B: Pro	cribe items. List a curate as possible ach a separate sh	e. If two marr neet to this fo	ied people are filing together, both rm. On the top of any additional pa	are equally responsible for	amended filing 12/15 t in the category where your supplying correct
/B: Pro	cribe items. List a curate as possible ach a separate sh	e. If two marr neet to this fo	ied people are filing together, both rm. On the top of any additional pa	are equally responsible for	12/15 t in the category where you supplying correct
/B: Pro	cribe items. List a curate as possible ach a separate sh	e. If two marr neet to this fo	ied people are filing together, both rm. On the top of any additional pa	are equally responsible for	t in the category where you supplying correct
•	·			ges, write your name and t	ase number (ii known).
esidence, Build	ling, Land, or Otl	her Real Esta	te You Own or Have an Interest In		
esidence, Build	ling, Land, or Oti	ner Keal Esta	te You Own or Have an Interest in		
legal or equit	able interest in a	ny residence	, building, land, or similar property?		
perty?					
		What is th	e property? Check all that apply		
o or other descrip	tion	Sin	gle-family home		I claims or exemptions. Put
e, or other descrip	uon	ш	-		Claims Secured by Property.
			adominium or cooperative		
		☐ Mai	nufactured or mobile home	Current value of the	Current value of the
SC 2	29445-0000	☐ Lan	d	entire property?	portion you own?
State	ZIP Code			\$402,000.00	\$402,000.0
		=			of your ownership interest
			In interest in the property? Check one	_ `.,	
			otor 1 only	JTWRS	
		_	otor 2 only		
		☐ Deb			
		_	otor 1 and Debtor 2 only	— Check if this is o	ommunity property
		Deb	otor 1 and Debtor 2 only east one of the debtors and another	Check if this is constructions)	community property
		☐ Deb ☐ At lo	· · · · · · · · · · · · · · · · · · ·	(see instructions)	ommunity property
0	operty? ble, or other descrip	operty? ole, or other description SC 29445-0000	what is the Sing Dup Cor Cor Mar SC 29445-0000 State ZIP Code Investment Content Co	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Duplex or mobile home I have Coreditors Who Have Cored Wh

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here.....=>

Part 2: Describe Your Vehicles

\$402,000.00

Debt	or 1 <u>Al</u>	exandra C	andela Whittle	Document Page 11 of 57	ase number (if known)	3/11/20 3.52FI
3. Ca	ırs, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Toyota		Who has an interest in the property? Check one		d claims or exemptions. Put
	Model:	Sienna		■ Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.
	Year:	2015		Debtor 2 only	Current value of the	Current value of the
	Approxim	ate mileage:	160,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:		☐ At least one of the debtors and another		
	VIN # 5	TDKK3DC	75S571712	☐ Check if this is community property (see instructions)	\$10,000.00	\$10,000.00
5 A				n for all of your entries from Part 2, including ar		\$40,000,00
.pa	ages you l	have attach	ed for Part 2. Write	that number here		\$10,000.00
Part 3	3: Describ	e Your Perso	onal and Household Ite	ems		
Do y	ou own o	r have any l	egal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		goods and f Major applian	furnishings nces, furniture, linens	, china, kitchenware		
-	Yes. Des	scribe				
				rnishings located at 100 lken Circle, Goose home - husband lives there)	e Creek	\$4,000.00
			Tools in garage	at 100 Iken Circle		\$2,000.00
E:		ncluding cell		eo, stereo, and digital equipment; computers, printe nedia players, games	ers, scanners; music colle	ctions; electronic devices
			Three television Samsung tablet Xbox 360, Wii	n sets, movie screen, two smart phones, tw s, one ipad.	vo	\$1,500.00
E:		Antiques and other collection	I figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other ar llectibles	t objects; stamp, coin, or	baseball card collections;

Official Form 106A/B Schedule A/B: Property page 2

Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Page 12 of 57 3/11/20 3:52PM Document Debtor 1 **Alexandra Candela Whittle** Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ No Yes. Describe..... two handguns (in husband's possession) \$300.00 Smith and Wesson 9 mm \$150 and 45 calibur \$150.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Womens clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... wedding ring (gift from grandmother) \$800.00 \$100.00 diamond earrings 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... dog "Rascal" pit bull \$50.00 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$9,250.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

☐ Yes.....

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No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

Page 14 of 57 Document Debtor 1 Alexandra Candela Whittle Case number (if known) ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... expected tax refund year ending 2019 \$12,000.00 (court ordered to Husband) Federal and State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information...

Case 20-01312-dd

Doc 1

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Page 15 of 57 3/11/20 3:52PM Document Case number (if known) Debtor 1 Alexandra Candela Whittle 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$31,349.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$402,000.00 56. Part 2: Total vehicles, line 5 \$10,000.00 Part 3: Total personal and household items, line 15 \$9,250.00 58. Part 4: Total financial assets, line 36 \$31.349.00

\$0.00

\$0.00

\$0.00

Copy personal property total

\$50,599.00

Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

59.

61.

\$452,599.00

\$50,599.00

Official Form 106A/B Schedule A/B: Property page 6 Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Desc Main

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				-	
Fill in this infor	mation to identify your	case:			
Debtor 1	Alexandra Cande	la Whittle			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA		
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	---------------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim	Specific laws that allow exemption
100 Iken Circle Goose Creek, SC 29445 Berkeley County	\$402,000.00	\$16,123.90	S.C. Code Ann. § 15-41-30(A)(1)(a)
purchased 4/01/2019 Line from Schedule A/B: 1.1		100% of fair market value, up to any applicable statutory limit	13-41-30(A)(1)(a)
2015 Toyota Sienna 160,000 miles VIN # 5TDKK3DC75S571712	\$10,000.00	\$0.00	S.C. Code Ann. § 15-41-30(A)(2)
Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit	10 41 00(A)(Z)
furniture and furnishings located at 100 Iken Circle, Goose Creek	\$4,000.00	\$4,000.00	S.C. Code Ann. § 15-41-30(A)(3)
(former marital home - husband lives there) Line from Schedule A/B: 6.1		100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)
Tools in garage at 100 lken Circle	\$2,000.00	\$0.00	S.C. Code Ann. § 15-41-30(A)(3)
LINE HOLL Schedule A/B. 3.2		100% of fair market value, up to any applicable statutory limit	10-41-00(A)(0)
Three television sets, movie screen, two smart phones, two Samsung	\$1,500.00	\$325.00	S.C. Code Ann. § 15-41-30(A)(3)
tablets, one ipad. Xbox 360, Wii Line from Schedule A/B: 7.1		100% of fair market value, up to any applicable statutory limit	וט דו טעראעט)

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Debtor	1 Alexandra Candela Whittle			Case number (if known)	
	ief description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	omens clothing	\$500.00 ■		\$500.00	S.C. Code Ann. § 15-41-30(A)(3)
	io nonii Gonedale / v.z. TTT			100% of fair market value, up to any applicable statutory limit	
	edding ring (gift from grandmother)	\$800.00		\$800.00	S.C. Code Ann. § 15-41-30(A)(4)
LII	ie IIIIII Schedule A.B. 12-1			100% of fair market value, up to any applicable statutory limit	10 41 00(1)(4)
	amond earrings	\$100.00		\$100.00	S.C. Code Ann. § 15-41-30(A)(4)
LII	ie IIIIII Schedule A/B. 12.2			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(4)
	og "Rascal" pit bull ne from Schedule A/B: 13.1	\$50.00		\$50.00	S.C. Code Ann. § 15-41-30(A)(3)
LII	ie nom Schedule A.B. 13.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)
	necking: First Citizens Federal	\$100.00		\$100.00	S.C. Code Ann. § 15-41-30(A)(5)
-	ne from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)
	01(k): Estranged Husband's T.	\$19,249.00		\$19,249.00	S.C. Code Ann. § 15-41-30(A)(13)
(w ac	vife has 50% interest in this count) ne from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(13)
	re you claiming a homestead exemption of ubject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covere	years after that for ca	ases fi	·	,

Yes

Case 20-01312-0	dd Doc'i Filed 03/11/20 Ente Document Page 18	erea 03/11/20 1: 8 of 57	5:56:00 Desc	3/11/20 3:52P
Fill in this information to identify	<u> </u>			
	andela Whittle			
First Name	Middle Name Last Name		-	
Debtor 2				
(Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for	the: DISTRICT OF SOUTH CAROLINA		_	
Case number			☐ Check	if this is an
			amend	ded filing
Official Form 106D	ors Who Have Claims Secure	d hy Propert	V	12/15
concare b. create	To who have claims eccure	a by 1 Topoli	<u> </u>	12/10
	ole. If two married people are filing together, both are e Il it out, number the entries, and attach it to this form. (
1. Do any creditors have claims secure	d by your property?			
\square No. Check this box and subn	nit this form to the court with your other schedules.	You have nothing else t	to report on this form.	
Yes. Fill in all of the informat	ion below.			
Part 1: List All Secured Claims				
		Column A	Column B	Column C
for each claim. If more than one creditor	has more than one secured claim, list the creditor separatel has a particular claim, list the other creditors in Part 2. As obstical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Regions Mortgage	Describe the property that secures the claim:	\$385,876.10	\$402,000.00	\$0.00
Creditor's Name	100 Iken Circle Goose Creek, SC			
	29445 Berkeley County			
POB 110	purchased 4/01/2019 As of the date you file, the claim is: Check all that			
Hattiesburg, MS	apply.			
39403-0110	_ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only	car loan)			

 \square Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Official Form 106D

lacksquare Debtor 1 and Debtor 2 only

community debt Date debt was incurred

At least one of the debtors and another ☐ Check if this claim relates to a

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Debtor 1 Alexandra Candela Whi	Case number (if known)			
First Name Middle N	ame Last Name			
2.2 Safe Federal Credit Union	Describe the property that secures the claim:	\$14,240.79	\$10,000.00	\$4,240.79
Creditor's Name	2015 Toyota Sienna 160,000 miles VIN # 5TDKK3DC75S571712			
160 West Westmark Boulevard Sumter, SC 29150	As of the date you file, the claim is: Check all that apply. Contingent	J		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 327	0		
			I	
Add the dollar value of your entries in C	tolumn A on this page. Write that number here:	\$400,116.8		
Write that number here:	the donar value totals from an pages.	\$400,116.8	39	
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that y we to someone else, list the creditor in Part 1, an t you listed in Part 1, list the additional creditors h iis page.	d then list the collection agend	cy here. Similarly, if yo	u have more
Name, Number, Street, City, State & Regions Mortgage POB 2153, Dept 2520 Pirmingham Al 25237 353	Last	which line in Part 1 did you enter 4 digits of account number	the creditor? 2.1	
Birmingham, AL 35287-252	U			

		Document	Page 20 of 57		3/11/20 3:52PN
Fill in this info	rmation to identify your ca	ase:			
Debtor 1	Alexandra Candela	Whittle			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_	
	ankruptcy Court for the:	DISTRICT OF SOUTH CARO			
Officed States B	ankruptcy Court for the.	DISTRICT OF SOUTH CARO	LINA	_	
Case number					haal Williams
(II KHOWH)					heck if this is an mended filing
Official For					
Schedule	E/F: Creditors Wh	no Have Unsecured	Claims		12/15
Schedule D: Cred eft. Attach the Co name and case no	itors Who Have Claims Secur ontinuation Page to this page umber (if known).	red by Property. If more space is . If you have no information to re	Do not include any creditors with par needed, copy the Part you need, fill port in a Part, do not file that Part. O	it out, number the ent	ries in the boxes on the
	All of Your PRIORITY Uns tors have priority unsecured				
No. Go to		ciains against your			
Yes.	Рап 2.				
	All of Your NONPRIORITY	Unsecured Claims			
	tors have nonpriority unsecu				
		t. Submit this form to the court with	your other schedules		
_	ave nothing to report in this par	t. Submit this form to the court with	your other schedules.		
Yes.					
unsecured cla	aim, list the creditor separately t	for each claim. For each claim lister	ne creditor who holds each claim. If a d, identify what type of claim it is. Do no have more than three nonpriority unsec	t list claims already incl	uded in Part 1. If more
					Total claim
4.1 Acces	sOne Credit	Last 4 digits of acc	count number		\$4,167.65
	ity Creditor's Name 140806	When was the deb	t incurred?		
_	Hill, VA 24281-0806	When was the des			
Number	Street City State Zip Code	As of the date you	file, the claim is: Check all that apply		
_	urred the debt? Check one.				
Debte	•	☐ Contingent			
☐ Debte	·	Unliquidated			
_	or 1 and Debtor 2 only	☐ Disputed			
	ast one of the debtors and anoth	По	RITY unsecured claim:		
☐ Ched	k if this claim is for a comm	<u> </u>	ng out of a separation agreement or div	vorce that you did not	
	aim subject to offset?	report as priority cla		rorce mai you did not	
■ No		☐ Debts to pension	n or profit-sharing plans, and other simi	ar debts	
☐ Yes		Other. Specify	medical for minor child and for child birth	debtor	

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Debt	or 1 Alexandra Candela Whittle	Case number (if known)	
4.2	Affirm	Last 4 digits of account number	\$1,615.41
	Nonpriority Creditor's Name 30 Isabella Street, Floor 4 Pittsburgh, PA 15212	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify childrens furniture	
4.3	American Web Loan	Last 4 digits of account number	\$2,506.03
	Nonpriority Creditor's Name 3910 West 6th Avenue Box 277 Stillwater, OK 74074	When was the debt incurred? 11/2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify personal loan	
4.4	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	\$5,237.80
	POB 982235 El Paso. TX 79998-2235	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify credit card	

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Debtor 1 Alexandra Candela Whittle

Case number (if known)

4.5	Capital One	Last 4 digits of account number 5740	\$555.39
	Nonpriority Creditor's Name		
	POB 71083	When was the debt incurred?	
	Charlotte, NC 28272-1083 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date year me, the stain is. Shock all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
4.6	Chase Bank One Card Serv	Last 4 digits of account number	\$17,000.00
	Nonpriority Creditor's Name		
	POB 15298 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
4.7	Citi Cards	Last 4 digits of account number	\$4,597.04
	Nonpriority Creditor's Name		ψ+,557.04
	PO Box 9001016	When was the debt incurred?	
	Louisville, KY 40290-1016 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dami is. Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Unliquidated	
	<u> </u>	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	

Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Desc Main Document Page 23 of 57 Scape number (if known)

City of Goose Creek EMS Nonpriority Creditor's Name	Last 4 digits of account number 9900	\$362.50
l16 Pridges Way Dr ∟exington, SC 29072-3737	When was the debt incurred? 12/31/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify EMS services	
Comenity/Big Lots	Last 4 digits of account number 0456	\$1,066.96
Nonpriority Creditor's Name	When was the debt incurred?	
San Antonio, TX 78265-9707		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify credit card	
CPI Security	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 2456 Remount Road #307	When was the debt incurred?	
Charleston, SC 29406 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
— 110		

		Document	Page 24 of 57	3/11/20 3:52PM
Debtor 1	Alexandra Candela Whittle		Case number (if known)	

Credit One Bank	Last 4 digits of account number 9315	\$936.60
Nonpriority Creditor's Name POB 60500	When was the debt incurred?	
City of Industry, CA 91716-5481	When was the dest incurred:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify credit card	
Financial Corporation of America	Last 4 digits of account number	\$2,237.00
Nonpriority Creditor's Name POB 203500	When was the debt incurred?	
Austin, TX 78720-3500	When was the dest incurred:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	medical collection for Pediatrix Medical on behalf of Oliver Whittle	
Our ania Omadia	FC42	\$4.500.04
Genesis Credit Nonpriority Creditor's Name	Last 4 digits of account number 5643	\$1,500.64
PO Box 84049	When was the debt incurred?	
Columbus, GA 31908-4049		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify credit card	

Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Document Page 25 of 57 3/11/20 3:52PM Case number (if known) Debtor 1 Alexandra Candela Whittle 4.1 \$60.00 **Lexington Medical Center** 4103 Last 4 digits of account number 4 Nonpriority Creditor's Name **POB 1409** 8/03/2019 When was the debt incurred? Lexington, SC 29071-1409 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes 4.1 Lightstream \$34,433.00 Last 4 digits of account number Nonpriority Creditor's Name POB 117320 When was the debt incurred? Atlanta, GA 30368-7320 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify consolidation loan ☐ Yes 4.1 **MUSC Health** 1678 \$55.68 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 931736 When was the debt incurred? Atlanta, GA 31193-1736 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify medical

Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Document Page 26 of 57 3/11/20 3:52PM Debtor 1 Alexandra Candela Whittle Case number (if known) 4.1 **MUSC Health** 0538 \$1,816.77 Last 4 digits of account number Nonpriority Creditor's Name PO Box 931736 8/22/2019 When was the debt incurred? Atlanta, GA 31193-1736 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes 4.1 **MUSC Health** 2988 \$141.36 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 931736 When was the debt incurred? 11/03/2019 Atlanta, GA 31193-1736 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Type of NONPRIORITY unsecured claim:

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Disputed

☐ Student loans

is the claim subject to onset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical	
Navy Federal Credit Union	Last 4 digits of account number 7228	\$1,968.00
Nonpriority Creditor's Name P.O. Box 3000	When was the debt incurred?	
Merrifield, VA 22119-3000 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify loan	

Debtor 1 and Debtor 2 only

debt

4.1 9 ☐ At least one of the debtors and another

☐ Check if this claim is for a community

Debtor 1 Alexandra Candela Whittle

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Case number (if known)

Palmetto Primary Care	Last 4 digits of account number 7243	\$30.0
lonpriority Creditor's Name 201 Sigma Drive, Suite 100 Summerville, SC 29486	When was the debt incurred?	_
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify medical	_
Pediatrix Medical Group	Last 4 digits of account number 2080	\$2,247.0
Nonpriority Creditor's Name	When was the debt incurred? 8/09/2018	
Chicago, IL 60680-1087	<u> </u>	_
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\hfill\Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical for Oliver Whittle	_
Summit BHC Cameron LLC/Waypoint Recovery	Last 4 digits of account number 0392	\$2,250.0
Nonpriority Creditor's Name 199 Wild Hearts Road	When was the debt incurred?	
Cameron, SC 29030-9333		_
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	

or 1 Alexandra Candela Whittle	Document Page 2	℧ UI ラ7 Case number (if known)	3/11/20 3.52
Syncb/Care Credit	Last 4 digits of account number		\$6,115.90
Nonpriority Creditor's Name POB 965036	When was the debt incurred?		
Orlando, FL 32896	When was the debt incurred:		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify medical	ig pane, and other entire desic	
Trident Medical Center	Last 4 digits of account number	7155	\$256.00
Nonpriority Creditor's Name POB 740766	When was the debt incurred?	12/21/2010	
Cincinnati, OH 45274-0766	when was the debt incurred?	12/31/2019	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify medical		
Verizon Wireless			# ECO 20
Nonpriority Creditor's Name	Last 4 digits of account number		\$560.32
500 Technology Drive	When was the debt incurred?		
Suite 550			
Weldon Spring, MO 63304		. 0	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only			
	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community	Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify cell phone

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

report as priority claims

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Alexandra Candela Whittle

Case number (if known)

Name and Address

Pediatrix Medical Group 1301 Concord Ter Fort Lauderdale, FL 33323 On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (*Check one*): □ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

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Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	•			Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 91,717.11
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 91,717.11

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Fill in this infor				
Debtor 1	Alexandra Cande	ela Whittle		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docume	iii raye si oi si	0/1//20 0.021
Fill in th	is information to identify your	case:		
Debtor 1	Alexandra Cande	la Whittle		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, t		Middle Name	Last Name	
	<u>.</u>			
United S	tates Bankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA	
Case nui	mber			
(if known)				Check if this is an
				amended filing
Officia	al Form 106H			
	dule H: Your Cod	ebtors		12/15
30110	dale III. I dal doa			12/13
eople ar	re filing together, both are equ	ally responsible for supposes on the left. Attach	olying correct information. In the Additional Page to thi	mplete and accurate as possible. If two married If more space is needed, copy the Additional Page, s page. On the top of any Additional Pages, write
1. De	o you have any codebtors? (If	you are filing a joint case,	do not list either spouse as a	codebtor.
□ N	0			
■ Ye	es			
2. W	ithin the last 8 years, have you	lived in a community or	operty state or territory? (Community property states and territories include
	ona, California, Idaho, Louisiana,			
	0 (1) 0			
	o. Go to line 3. es. Did your spouse, former spot	ise or legal equivalent live	with you at the time?	
	cs. Dia your spouse, former spor	isc, or legal equivalent live	s with you at the time:	
in lir Forn	ne 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sure	our spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Official Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	D Code		Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and Zi	P Code		Check all schedules that apply:
3.1	Douglas Whittle 100 Iken Circle			Schedule D, line 2.1
	Goose Creek, SC 29445-7	148		☐ Schedule E/F, line
				□ Schedule G Regions Mortgage
3.2	Douglas Whittle			☐ Schedule D, line
				Schedule E/F, line 4.7
				□ Schedule G
				Citi Cards
3.3	Douglas Whittle			☐ Schedule D, line
	100 Iken Circle			Schedule E/F, line4.15
	Goose Creek, SC 29445			□ Schedule G
				Lightstream

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Case number (if known)

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Douglas Whittle	☐ Schedule D, line
	100 Iken Circle	■ Schedule E/F, line 4.21
	Goose Creek, SC 29445	☐ Schedule G
		Pediatrix Medical Group
3.5	Douglas Whittle	☐ Schedule D, line
		■ Schedule E/F, line 4.23
		☐ Schedule G
		Syncb/Care Credit
3.6	Douglas Whittle	☐ Schedule D, line
3.0	Douglas Willitie	■ Schedule E/F, line 4.25
		☐ Schedule G
		Verizon Wireless
0.7	December Milescole	
3.7	Douglas Whittle	☐ Schedule D, line
		■ Schedule E/F, line <u>4.4</u> □ Schedule G
		Bank of America
0.0	December Milestelle	
3.8	Douglas Whittle	☐ Schedule D, line
		■ Schedule E/F, line <u>4.12</u> □ Schedule G
		Financial Corporation of America
	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3.9	Douglas Whittle	☐ Schedule D, line
		■ Schedule E/F, line <u>4.19</u> □ Schedule G
		Navy Federal Credit Union
	.	
3.10	Douglas Whittle Jr. 100 Iken Circle	Schedule D, line 2.2
	Goose Creek, SC 29445	☐ Schedule E/F, line
	·	☐ Schedule G Safe Federal Credit Union
		Sais I sasial Steak Sillon

Debtor 1 Alexandra Candela Whittle

	in this information to ide										
Det	otor 1 Ale	exandra C	andela Whittle			_					
	otor 2 buse, if filing)					_					
Uni	ted States Bankruptcy C	Court for the:	DISTRICT OF SOUTH	I CAROLINA		_					
	se number						Check if this is An amende A supplement 13 income	ed fili ent s	howing	g postpetition llowing date:	
0	fficial Form 10	<u>)61</u>					MM / DD/ Y	YYY	_		
So	chedule I: Yo	ur Inco	ome								12/15
spo atta	use. If you are separat ch a separate sheet to tt1: Describe Em	ed and you this form. (are married and not filin r spouse is not filing wit On the top of any addition	th you, do not inclu onal pages, write yo	ude inforr	nati	on about your spo I case number (if	ouse knov	e. If mor wn). Ar	re space is nswer every	needed,
	information.			Debtor 1						ing spouse	
	If you have more than attach a separate paginformation about add employers.	e with	Employment status Occupation	■ Employed □ Not employed			□ Empl	,			
	Include part-time, seas	sonal, or	Employer's name								
	Occupation may include or homemaker, if it ap		Employer's address								
			How long employed th	nere?							
Par	t 2: Give Details	About Mon	thly Income								
	mate monthly income use unless you are sepa		te you file this form. If y	ou have nothing to	report for	any	line, write \$0 in the	spa	ce. Incl	lude your noi	n-filing
If yo more	ou or your non-filing spou e space, attach a separa	use have mo ate sheet to	re than one employer, co	mbine the information	on for all e	mple	oyers for that perso	on on	the lin	es below. If	you need
							For Debtor 1			otor 2 or ng spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$	0.00	\$		N/A	
3.	Estimate and list mo	nthly overti	me pay.		3.	+\$	0.00	+9	š	N/A	
4.	Calculate gross Inco	me. Add lin	e 2 + line 3.		4.	\$	0.00		\$	N/A	

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Debtor 1	Alexandra Candela Whittle	_	Cas	se number (if ki	nown)				
				or Debtor 1		nor	Debtor	pouse	
Co	py line 4 here	4.	\$		0.00	\$_		N/A	
5. Lis	at all payroll deductions:								
5a	Tax, Medicare, and Social Security deductions	5a.	. \$	(0.00	\$		N/A	
5b	Mandatory contributions for retirement plans	5b.	. \$	(0.00	\$		N/A	
5c.	Voluntary contributions for retirement plans	5c.	. \$		0.00	\$_		N/A	
5d	, , ,	5d.			0.00	\$_		N/A	
5e		5e.			0.00	\$_		N/A	
5f.	Domestic support obligations	5f.			0.00	\$_		N/A	
5g		5g.			0.00	–		N/A	
5h		_ 5h.	.+ \$		0.00	_		N/A	
6. A d	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		0.00	\$_		N/A	
7. C a	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	(0.00	\$_		N/A	
8. Lis 8a	at all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	monthly net income.	8a.	. \$		0.00	\$		N/A	
8b		8b.	. \$	(0.00	\$		N/A	
8c. 8d 8e	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	. \$		0.00 0.00 0.00	\$_ \$_ \$_		N/A N/A N/A	
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	(0.00	\$		N/A	
8g		 8g.	. \$		0.00	\$		N/A	
8h	Other monthly income. Specify:	8h.	.+ \$	(0.00	+ \$		N/A	
9. A d	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	(0.00	\$_		N/A	
10 C o	laulate monthly income. Add line 7 + line 0	10	\$	0.00	+ \$		NI/A	_ c	0.00
	Iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Φ	0.00	+ •		N/A	= \$	0.00
11. Sta	ate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your ler friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe		, ,		•	Schedule 11.		0.00
Wr	d the amount in the last column of line 10 to the amount in line 11. The resite that amount on the Summary of Schedules and Statistical Summary of Certain blies						12.	\$	0.00
13. Do	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?						Combined monthly in	-

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EM.	in this informs	ation to identify y	our caca:							
Deb	otor 1	Alexandra C	andela W	/hittle			eck if t			
Doh	otor 2							mended filing	ving postpetition cha	antor
	ouse, if filing)								the following date:	арцег
\ - I	3,							•		
Unit	ed States Bank	ruptcy Court for the	: DISTRI	CT OF SOUTH CAROLINA	<i>P</i>		MM	/ DD / YYYY		
	e number nown)									
0	fficial Fo	orm 106J								
S	chedule	J: Your	Exper	ises						12/15
info nur	ormation. If member (if know	nore space is ne n). Answer eve	eded, atta ry questio	If two married people ar ch another sheet to this n.						
Par 1.	t 1: Desci	ribe Your House	ehold							
١.	_									
	No. Go to									
			in a separ	ate household?						
	ЦΥ	es. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	ı
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do your exi	penses include	_						☐ Yes	
J.	expenses o	f people other t d your depende	than $_{oldsymbol{\square}}$	No Yes						
		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
				government assistance is sluded it on Schedule I: Y						
	ficial Form 10		ia nave inc	nadea it on concade i. i	our moome		_	Your expe	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage	4.	\$		0.00	
	If not include	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		estate taxes erty, homeowner'	s. or renter	's insurance		4a. 4b.	: —		0.00 0.00	
		•		ipkeep expenses		4c.	: —		0.00	
		owner's associa	•			4d.	: —		0.00	
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

Debtor 1 Alexandra Candela Whittle Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. \$ 0.00 6a. 6b. Water, sewer, garbage collection 6b. \$ 0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 40.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 300.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 50.00 Personal care products and services 10. \$ 25.00 11. Medical and dental expenses 11. \$ 50.00 12. Transportation. Include gas, maintenance, bus or train fare. 200.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 14. \$ 0.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 110.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 Specify: 16. \$ Installment or lease payments: 409.82 17a. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 318.00 deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ Other payments you make to support others who do not live with you. 0.00 19 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 20b. Real estate taxes 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. \$ 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 1,552.82 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 0.00 23b. Copy your monthly expenses from line 22c above. 23b. 1,552.82 23c. Subtract your monthly expenses from your monthly income. -1.552.82 23c. The result is your monthly net income. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

No.	
☐ Yes.	Explain here:

Fill in this	information to identify your	case:			
Debtor 1	Alexandra Cande	la Whittle			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA		
Case numb	ber			_	
(if known)					Check if this is an
					amended filing
	Form 106Dec Aration About a	ın Individual	Debtor's Sch	nedules	12/15
£ 4	sied weenle ove fillien tear-ther	. hath are accelled as	noible for our while a securi	at information	
r two marr	ried people are filing togethe	r, both are equally respon	nsible for supplying corre	ct information.	
btaining r	file this form whenever you fi money or property by fraud in oth. 18 U.S.C. §§ 152, 1341, 1	n connection with a bank			
	Sign Below				
Did y	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
1	No				
_ `	Yes. Name of person			Attach Bankruptcy P	Petition Preparer's Notice,
				Declaration, and Sig	nature (Official Form 119)
	r penalty of perjury, I declare ney are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
X /s	s/ Alexandra Candela Whit	tle	Х		
	lexandra Candela Whittle	· · · · · ·	Signature of D	ebtor 2	
Si	ignature of Debtor 1		-		
Da	ate March 11, 2020		Date		
					

Cas	e 20-01312-dd		Filed 03/11/2 Document	20 Entered 03/11/20 15:56: Page 38 of 57	00	Desc Main 3/11/20 3:52PM
	nation to identify your					
Debtor 1	Alexandra Cande	ela Whittle Middle N	Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle 1	Name	Last Name		
	nkruptcy Court for the:		OF SOUTH CARO			
	and aproy Court for a lo.	<u> </u>	<u> </u>			
Case number (if known)			_			Check if this is an amended filing
						amondod ming
Official Fo	rm 107					
		Affairs fo	or Individua	als Filing for Bankruptcy		4/19
				ling together, both are equally responsib		
	nore space is needed, a n). Answer every ques		rate sheet to this	form. On the top of any additional pages	, write	your name and case
Part 1: Give I	Details About Your Mar	rital Status ar	nd Where You Live	ed Before		
1. What is you	r current marital status	s?				
_						
■ Married□ Not ma						
2. During the I	ast 3 years, have you l	ived anvwhe	re other than wher	re vou live now?		
□ No	• , •	•		•		
_	st all of the places you liv	ved in the last	3 years. Do not inc	lude where you live now.		
Debtor 1 Pr	rior Address:		ates Debtor 1	Debtor 2 Prior Address:		Dates Debtor 2 lived there
100 Iken C Goose Cro	Circle eek, SC 29445	Fe	om-To: ebruary 2019 - ecember 2019	☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
481 Denm Columbia	an Loop , SC 29229	20	om-To: 012 through ebruary 2019	☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
				quivalent in a community property state of the Mexico, Puerto Rico, Texas, Washing		

- 3. state

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 **Explain the Sources of Your Income**

Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

Debtor 1	
Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Debtor 2 Sources of income Check all that apply.

Gross income (before deductions and exclusions)

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Case number (if known)

				Debtor 1			Debtor 2		
Source		Sources of income Check all that apply.			Check all that apply. (before		Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2019)			31, 2019)	☐ Wages, commission bonuses, tips	Wages, commissions, sources, tips \$800.00			nmissions,	
				Operating a busing	ess		☐ Operating a	business	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco		e; interest; divi	of other income are a dends; money collectived together, list it	alimony; child supp cted from lawsuits; only once under De	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
				Dahtan 4			Dahtan 0		
				Debtor 1 Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
	last calen nuary 1 to	dar year: December	31, 2019)	sale of household items and clothing		\$800.00			
	■ Yes.	During the No. Yes	90 days before 30 day	personal, family, or ho are you filed for bankrup. each creditor to whom y editor. Do not include p payments to an attorner on 4/01/22 and every ar both have primarily are you filed for bankrup. each creditor to whom y ments for domestic sup	ousehold purpo otcy, did you pa rou paid a total ayments for do by for this bank 3 years after the consumer de otcy, did you pa rou paid a total	se." ay any creditor a tota of \$6,825* or more omestic support obli- ruptcy case. nat for cases filed or bts. ay any creditor a tota of \$600 or more an	al of \$6,825* or mo in one or more pay gations, such as character the date of \$600 or more?	re? /ments and the support and support an	and alimony. Also, do
	Creditor'	's Name an	•	this bankruptcy case. Dates of	pavment	Total amount	Amount you	Was this r	payment for
	Orcuitor	o realife and	a Address	Dutes of p	odyment	paid	still owe	vius illo į	ouyment for
7.	Insiders in of which y a business alimony.	iclude your i ou are an of s you operat	elatives; any ficer, director	, person in control, or o roprietor. 11 U.S.C. § 1	ves of any gen wner of 20% o	eral partners; partner r more of their votin	erships of which yo g securities; and ar	u are a gene ny managing	eral partner; corporations agent, including one fo
	Insider's	Name and	Address	Dates of p	payment	Total amount	Amount you	Reason fo	or this payment
						paid	still owe		

Debtor 1 Alexandra Candela Whittle

Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Desc Main 3/11/20 3:52PM Page 40 of 57 Document Debtor 1 **Alexandra Candela Whittle** Case number (if known) insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number Douglas Whittle vs Alexandra **Berkeley County Family Divorce action** Pending Whittle Court □ On appeal 2020-DR-08-236 300 B California Avenue ☐ Concluded Moncks Corner, SC 29461 Temporary Order has been filed 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift.

per person

Address:

Describe the gifts

Value

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave

the gifts

Case 20-01312-dd Doc 1 Filed 03/11/20 Entered 03/11/20 15:56:00 Desc Main 3/11/20 3:52PM Page 41 of 57 Document Debtor 1 **Alexandra Candela Whittle** Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No П Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was **Address** payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or property transferred Address payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο

П

Name of trust

Description and value of the property transferred

Yes. Fill in the details.

Date Transfer was

made

Debtor 1 Alexandra Candela Whittle

Case number (if known)

Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Sto	rage Units	s			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 you cash, or other valuables?	ear before you filed for	bankruptcy, any	y safe dep	osit box or other deposit	ory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?		
22.	Have you stored property in a storage unit of	place other than your	home within 1 y	ear befor	e you filed for bankruptcy	/?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control f	or Someone Else						
23.	Do you hold or control any property that son for someone.	neone else owns? Inclu	ıde any property	you borr	owed from, are storing fo	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	the property	Value		
Par	t 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definitio	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface	water, groundw					
	Site means any location, facility, or property to own, operate, or utilize it, including dispose		environmental la	w, whethe	er you now own, operate,	or utilize it or used		
	Hazardous material means anything an envir		as a hazardous v	waste, haz	zardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings tha	t you know about, rega	rdless of when t	they occu	rred.			
24.	Has any governmental unit notified you that	you may be liable or po	otentially liable u	ınder or ir	n violation of an environm	nental law?		
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, S		Enviro know i	nmental law, if you it	Date of notice		

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> _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

■ No

Official Form 107

☐ Yes. Name of Person

Debtor 1 Alexandra Candela Whittle

Case number (if known)

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Fill in this inforn	nation to identify your	case:		
Debtor 1	Alexandra Cande	la Whittle		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Bar	nkruptcy Court for the:	DISTRICT OF SO	OUTH CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	rm 108			
		n for Indiv	viduals Filing Under Ch	apter 7 12/15
	vidual filing under cha claims secured by yo	• • •	ll out this form if:	
You must file this	ver is earlier, unless th	rithin 30 days after	ot expired. you file your bankruptcy petition or by the e time for cause. You must also send copid	
	ople are filing together	r in a joint case, bo	oth are equally responsible for supplying co	rrect information. Both debtors must
Be as complete a			s needed, attach a separate sheet to this fo	rm. On the top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
For any creditorinformation be		art 1 of Schedule [): Creditors Who Have Claims Secured by F	roperty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the prope secures a debt?	rty that Did you claim the property as exempt on Schedule C?
One difference . B			_	
	egions Mortgage		Surrender the property.	□ No
name:			☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
Description of	100 Iken Circle Go	•	Reaffirmation Agreement.	
property securing debt:	SC 29445 Berkele purchased 4/01/20		☐ Retain the property and [explain]:	
Creditor's Sa	afe Federal Credit U	nion	☐ Surrender the property.	□No
name:			☐ Retain the property and redeem it.	_
Description of	2015 Toyota Sienn	a 160,000	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	miles		Retain the property and [explain]:	
securing debt	VIN # 5TDKK3DC7	555/1/12	Day purguant to current contract	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Pay pursuant to current contract

Describe your unexpired personal property leases

Will the lease be assumed?

securing debt:

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Debtor 1 Alexandra Candela White	le Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	□ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that property that is subject to an unexpired	have indicated my intention about any property of my estate that secures a debt and any personal lease.
X /s/ Alexandra Candela Whittle	x
Alexandra Candela Whittle Signature of Debtor 1	Signature of Debtor 2
Date March 11, 2020	Date

Fill in this informa	ation to identify your case:		Check one box only as directed in this form and in Form				
Debtor 1	Alexandra Candela Whittle		122A-1Supp:				
Debtor 2 (Spouse, if filing)			■ 1. There is no presumption of abuse				
United States Ba	ankruptcy Court for the: District of South Carolina	_	☐ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test</i>				
Case number _ (if known)		_	Calculation (Official Form 122A-2). ☐ 3. The Means Test does not apply now because of				

☐ Check if this is an amended filing

qualified military service but it could apply later.

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: **Calculate Your Current Monthly Income**

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - Married and your spouse is NOT filing with you. You and your spouse are:
 - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and co	ommissio	ons (before all	\$	133.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payme	ents from	a spouse if	\$	0.00	\$	
4.	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.					0.00	\$	
5.	Net income from operating a business, profession,	or farı	n					
			Deb	otor 1				
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	- \$	0.00					
	Net monthly income from a business, profession, or far	m \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property		Dob	otor 1				
		Φ.	0.00	otor i				
	Gross receipts (before all deductions)	\$_						
	Ordinary and necessary operating expenses	- \$ _	0.00					
	Net monthly income from rental or other real property	\$_	0.00	Copy here ->	\$	0.00	\$	
7.	Interest, dividends, and royalties				\$	0.00	\$	

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		Document	Page 48 of 57	

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	nousa	
8.	Unemployment compensation			\$	0.00	\$	poudo	
٥.	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benefi	t under	· 	0.00	*		
		0.0	00					
	For you \$ For your spouse \$							
	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	ount received that was		\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hun domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or payment nanity, or international	s or	\$	0.00	¢		
	•		_	Ф \$	0.00	\$ \$		
	Total amounts from congrete pages, if any			<u> </u>	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	Т		
11.	Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the tot		\$	133.00	+ \$		= \$	133.00
							Total c	urrent monthly
Part	2: Determine Whether the Means Test Applies to	o You					income	
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	nere=>	\$	133.00
	Multiply by 12 (the number of months in a year)						x 1	2
	12b. The result is your annual income for this part of the	e form				12b.	\$	1,596.00
13.	Calculate the median family income that applies to y	ou. Follow these step	s:					
	Fill in the state in which you live.	SC						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size of	of household.				13.	\$ 4	6,710.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	ecified	in the separa	te instruc	tions		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, che	eck box	1, There is n	o presum	ption of abuse		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2,	The pre	esumption of	abuse is (determined by	Form 12	2A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	this sta	atement and i	n any atta	achments is tru	ie and co	rrect.
	X /s/ Alexandra Candela Whittle							
	Alexandra Candela Whittle Signature of Debtor 1							
	Date March 11, 2020 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fi	le it with this form.						

Alexandra Candela Whittle

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

3/11/20 3:52PM

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of South Carolina

In re	Alexandra Candela Whittle		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	EBTOR(S)
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filire rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	500.00
	Prior to the filing of this statement I have received.			500.00
	Balance Due			0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mem	bers and associates of my law firm.
[I have agreed to share the above-disclosed compension copy of the agreement, together with a list of the national copy of the agreement.			
5. I	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy c	ase, including:
b c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credite [Other provisions as needed]	tement of affairs and plan which	n may be required;	
6. B	y agreement with the debtor(s), the above-disclosed fee	e does not include the following	g service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of an nkruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Ma	arch 11, 2020	/s/ Ingrid H. Rudo	olph	
Da	nte	Ingrid H. Rudolpi Signature of Attorno Ingrid H. Rudolpi 1483 Tobias Gad Charleston, SC 2 8438144215 Fax irlaw88@yahoo.c	_{2y} h, P.C. son Blvd., Suite 2 9407 :: 8437818031	05A
		Name of law firm	, OIII	

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court District of South Carolina

In re	Alexandra Candela Whittle		Case No.	
		Debtor(s)	Chapter	7
	CERTIFICA	TION VERIFYING CREDIT	TOR MATRIX	
CM/EC	The above named debtor, or attorned aptroperation and the property Rule 1007-1 that the master mail CF, or conventionally filed in a typed ation to, the debtor's schedules, statement	ing list of creditors submitted either hard copy scannable format which	er on computer d has been compa	iskette, electronically filed via ared to, and contains identical
	Master mailing list of creditors submitted	ed via:		
	(a) computer disker	tte		
	(b) scannable hard (number of sheets submitted _			
	(c) X electronic version	filed via CM/ECF		
Date:	March 11, 2020	/s/ Alexandra Candela Whittle	e	
		Signature of Debtor		
Date:	March 11, 2020	/s/ Ingrid H. Rudolph		

Ingrid H. Rudolph Ingrid H. Rudolph, P.C. 1483 Tobias Gadson Blvd., Suite 205A

Charleston, SC 29407

8438144215 Fax: 8437818031 Typed/Printed Name/Address/Telephone

100739 SC

District Court I.D. Number

Signature of Attorney

ACCESSONE CREDIT
POB 4140806
ROSE HILL VA 24281-0806

AFFIRM 30 ISABELLA STREET, FLOOR 4 PITTSBURGH PA 15212

AMERICAN WEB LOAN 3910 WEST 6TH AVENUE BOX 277 STILLWATER OK 74074

BANK OF AMERICA POB 982235 EL PASO TX 79998-2235

CAPITAL ONE
POB 71083
CHARLOTTE NC 28272-1083

CHASE BANK ONE CARD SERV POB 15298 WILMINGTON DE 19850

CITI CARDS PO BOX 9001016 LOUISVILLE KY 40290-1016

CITY OF GOOSE CREEK EMS 116 PRIDGES WAY DR LEXINGTON SC 29072-3737

COMENITY/BIG LOTS
POB 659707
SAN ANTONIO TX 78265-9707

CPI SECURITY 2456 REMOUNT ROAD #307 CHARLESTON SC 29406

CREDIT ONE BANK POB 60500 CITY OF INDUSTRY CA 91716-5481 DOUGLAS WHITTLE 100 IKEN CIRCLE GOOSE CREEK SC 29445-7148

DOUGLAS WHITTLE JR. 100 IKEN CIRCLE GOOSE CREEK SC 29445

FINANCIAL CORPORATION OF AMERICA POB 203500 AUSTIN TX 78720-3500

GENESIS CREDIT PO BOX 84049 COLUMBUS GA 31908-4049

LEXINGTON MEDICAL CENTER POB 1409
LEXINGTON SC 29071-1409

LIGHTSTREAM POB 117320 ATLANTA GA 30368-7320

MUSC HEALTH
PO BOX 931736
ATLANTA GA 31193-1736

MUSC HEALTH PO BOX 931736 ATLANTA GA 31193-1736

MUSC HEALTH
PO BOX 931736
ATLANTA GA 31193-1736

NAVY FEDERAL CREDIT UNION P.O. BOX 3000 MERRIFIELD VA 22119-3000

PALMETTO PRIMARY CARE 201 SIGMA DRIVE, SUITE 100 SUMMERVILLE SC 29486 PEDIATRIX MEDICAL GROUP POB 88087 CHICAGO IL 60680-1087

PEDIATRIX MEDICAL GROUP 1301 CONCORD TER FORT LAUDERDALE FL 33323

REGIONS MORTGAGE POB 110 HATTIESBURG MS 39403-0110

REGIONS MORTGAGE POB 2153, DEPT 2520 BIRMINGHAM AL 35287-2520

SAFE FEDERAL CREDIT UNION 160 WEST WESTMARK BOULEVARD SUMTER SC 29150

SUMMIT BHC CAMERON LLC/WAYPOINT RECOVERY 499 WILD HEARTS ROAD CAMERON SC 29030-9333

SYNCB/CARE CREDIT POB 965036 ORLANDO FL 32896

TRIDENT MEDICAL CENTER POB 740766 CINCINNATI OH 45274-0766

VERIZON WIRELESS 500 TECHNOLOGY DRIVE SUITE 550 WELDON SPRING MO 63304